

Kansas Department of Health and Environment

Office of Vital Statistics

CERTIFICATE OF DEATH

115-2018-01202

State File Number

1. Deceased's Legal Name (First, Middle, Last)		2. Sex	3. Date Of Death (Month, Day, Year)	4. Social Security Number	5. Date Filed By State Registrar	
MARION JULIA HOFFMAN		FEMALE	01/17/2018	██████████	01/22/2018	
6. Last Name Prior to First Marriage	7a. Date Of Birth	7b. Age	8. Place Of Birth (City And State Or Foreign Country)		9. Deceased Ever In U.S. Armed Forces	
MCGRAW	██████████	90 YEAR(S)	HOGES, KANSAS		NO	
10a. Place Of Death		10b. Facility Name (If Not Institution, Street And Number)			10c. County Of Death	10d. Zip Code
DECEDENT RESIDENCE		2328 N 81ST COURT			WYANDOTTE	66109
10e. City or Town Of Death	11. Marital Status	12. Surviving Spouse (Name Prior to First Marriage)			13a. Residence - Street Address	
KANSAS CITY	MARRIED	BERNARD ARTHUR HOFFMAN			2328 N 81ST COURT	
13b. State or Foreign Country	13c. County or Province	13d. City or Town			13e. Zip Code	13f. Inside City Limits
KANSAS	WYANDOTTE	KANSAS CITY			66109	YES
14. Deceased's Ancestry	15. Deceased's Race					
IRISH	WHITE					
16. Deceased's Hispanic Origin						
NOT SPANISH, HISPANIC, LATINO						
17. Deceased's Education		18. Deceased's Occupation			19. Deceased's Industry	
ASSOCIATE DEGREE		OFFICE ADMINISTRATION			BRIDGE BUILDERS CONSTRUCTION UNION	
20. Father/Parent Birth Name (First, Middle, Last)		21. Mother/Parent Birth Name (First, Middle, Last)				
HENRY J. MCGRAW		EVA REARDON				
22a. Informant's Name (First, Middle, Last)		22b. Mailing Address (Street, Number, City, State, And Zip Code)			22c. Relationship To Deceased	
BERNARD HOFFMAN		2328 N 81ST COURT, KANSAS CITY, KANSAS, 66109			HUSBAND	
23. Method Of Disposition	24a. Place Of Disposition			24b. Location		
BURIAL	GATE OF HEAVEN			KANSAS CITY, KANSAS		
25. Funeral Service Licensee And License Number	26. Name Of Embalmer And License Number					
/e/ALENA HASKINS - 2963	JENNA ALEXANDER - 2016021552					
27. Name And Address Of Firm	CHAPEL HILL BUTLER FUNERAL HOME, 701 N 94TH STREET, KANSAS CITY, KANSAS, 66112					
28. Cause Of Death - Part I. Events (diseases, injuries, or complications) that directly caused the death.						Approximate Interval: Onset To Death
IMMEDIATE CAUSE (Final Cause Or Condition Resulting In Death)	A) INFLUENZA					A) DAYS
Conditions, if any, leading To cause listed on line A)	B)					B)
UNDERLYING CAUSE (Disease or Injury that initiated the events resulting in death) LISTED LAST	C)					C)
D)					D)	
Part II. Other Significant Conditions Contributing To Death But Not Resulting In The Underlying Cause Given In Part I.		29a. Autopsy	29b. Autopsy Findings Available To Complete The Cause Of Death		29c. Coroner Contacted	
HEART DISEASE, ATRIAL FIBRILLATION, RECENT URINARY TRACT INFECTION, HIP SEPSIS		NO			NO	
30. Did Tobacco Use Contribute To Death?	31. If Female:	32. Manner Of Death				
UNKNOWN	NOT PREGNANT WITHIN THE PAST YEAR	NATURAL				
33a. Date Of Injury	33b. Time Of Injury	33c. Injury At Work	33d. How Injury Occurred			
33e. Place Of Injury	33f. Location (Street And Number Or Rural Route, City Or Town, State, And Zip Code)					
34a. Date Pronounced Dead	34b. Time Pronounced Dead	34c. Actual Or Presumed Time Of Death	34d. Name Of Person Pronouncing Death	34e. License No.		
01/17/2018	5:00 PM	5:00 PM				
35a. Practicing and Certifying Physician	35b. License No.	35c. Date Certified	35d. Address And Zip Code Of Person Completing Cause Of Death			
/e/JOHN R. HANSEN - MD	0429103	01/20/2018	7381 W 133RD #100, OVERLAND PARK, KANSAS, 66213			

01/22/2018 V0074866959 01 HOFFMAN 201804001202 10 Reg M

VS231A - Rev. 10/11/2016

Topeka, Kansas, certified on the date stamped below.

STATE OF KANSAS
WILL FARMER
REGISTRAR

2018 JAN 22 AM 10:37



Elizabeth W. Saadi

Elizabeth W. Saadi, Ph.D
State Registrar
Office of Vital Statistics
Department of Health & Environment

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It is in violation of KSA 65-2422d(g) to prepare or issue any certificate which purports to be an original, certified copy or abstract or copy of a certificate, except as authorized in the Uniform Vital Statistics Act or rules and regulations adopted under this act.

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